



**Nursery Admission Request Form for \_\_\_\_\_ intake**

Child's Surname:	Child' First Name(s):
Address:	Date of Birth:
	Gender: (Male/Female)
Post Code:	Religion (if any):
Nationality:	Home Language:
Are you an International New Arrival? yes/no Does your child speak any English? yes/no? If Yes please provide the date you arrived in the UK ...../...../.....	Has your child had their 2 Year health check? Yes/No  Any Additional Needs? <i>(Allergies/dietary/please specify/information from their health check you would like to share)</i>
Please give name(s) of sibling(s) registered at Old Moat Primary	

Name of Previous Nursery/Day Care (If any):	Contact Number:
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<b>Parent/Carer Details. If you have applied for 30 eligibility please enter those details first.</b>			
Parent/Carer Full Legal Name:		Relationship to Child:	
Date of Birth:	National Insurance Number:	30 Hours 11 Digit Eligibility Code:	
Mobile:	Home:	Work:	
Parent/Carer Full Legal Name:		Relationship to child:	
Mobile:	Home:	Work:	
Email address:			

**Please return the form to the school office and present your child's birth certificate or other valid proof of identification**